

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001406

Entity Name: SOUTH FORK OF HILLSBOROUGH COUNTY III HOMEOWNERS ASSOCIATION, INC.**FILED**
Apr 12, 2022
Secretary of State
8795600846CC**Current Principal Place of Business:**C/O FIRSTSERVICE RESIDENTIAL
2870 SCHERER DR. N. SUITE 100
TAMPA, FL 33716**Current Mailing Address:**C/O FIRSTSERVICE RESIDENTIAL
2870 SCHERER DR. N. SUITE 100
TAMPA, FL 33716 US**FEI Number: 20-4779384****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FRAZIER & BOWLES, ATTORNEYS AT LAW
FRAZIER & BOWLES, ATTORNEYS AT LAW
202 S. ROME AVE. SUITE 125
TAMPA, FL 33606 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE: NATHAN FRAZIER****04/12/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	LINVILLE, HEATHER
Address	C/O FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR. N. SUITE 100
City-State-Zip:	TAMPA FL 33716

Title	VP
Name	FARRELL, TINA
Address	C/O FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR. N. SUITE 100
City-State-Zip:	TAMPA FL 33716

Title	SECRETARY
Name	BROWN-JONES, SUZETTE
Address	C/O FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR. N. SUITE 100
City-State-Zip:	TAMPA FL 33716

Title	DIRECTOR
Name	SELL, JOHN
Address	C/O FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR. N. SUITE 100
City-State-Zip:	TAMPA FL 33716

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HEATHER LINVILLE**PRESIDENT****04/12/2022**

Electronic Signature of Signing Officer/Director Detail

Date